BEST AVAILABLE CODY

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2001

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
TOTAL 01 AND			(Column 1)		(Column 2)		T	TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			Ч					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			IJ minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			U minus 3 =		* 1			X42=		ΟR	X84=	84
MU	LTIPLE DEPEN	DENT CLAIM PI					+140=		OR	+280=		
* If the difference in column 1 is less than zero, ente					r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	824
	C	LAIMS AS A	- PAR	T II			•			OTHER		
		(Column 1)	(Colur					SMALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	E CLAINA	=		X42=		OR	X84=	U. 19
	FIRST PRESE	NIATION OF MI	ULTIPLE DE	PENUEN	CLAIM			+140=.		OR	+280=	
								TOTAL		OR	TOTAL	
		Α[DDIT. FEE		IOI1	ADDIT. FEE						
		(Column 1)		(Colu	mn 2) IEST	(Column 3)		<u> </u>	4 D D I	1 1		1551
AMENDMENT B	,	REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X42=		OR	X84=	
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM			+140=		OR	+280=	
							L ^5	TOTAL ODIT. FEE			TOTAL ADDIT. FEE	
		AL	JUII. FEE		,	ADDIT. FEET						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		PREVI		PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1 62.62
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT						-			UK		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=	
** If the entry in column 1 is less than the entry in column 2, write 0 in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		nber Previously Pa					r foun	d in the app	ropriate box	c in co	lumn 1.	